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2292 7590 03/12/2004

BIRCH STEWART KOLASCH & BIRCH,  
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/091,560	03/07/2002	Hideki Akiyama	0505-0965P	9103

TITLE OF INVENTION: SHOCK ABSORBING STRUCTURE FOR VEHICLES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	06/14/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
ROSENBERG, LAURA B	3616	280-784000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

BIRCH, STEWART,  
KOLASCH & BIRCH, LLP

2 \_\_\_\_\_

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

HONDA GIKEN KOGYO

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

TOKYO, JAPAN

KABUSHIKI KAISHA

Please check the appropriate assignee category or categories (will not be printed on the patent);  individual  corporation or other private group entity  government

4a. The following fee(s) are enclosed:

Issue Fee

4b. Payment of Fee(s):

Publication Fee

A check in the amount of the fee(s) is enclosed. \*\* IF NECESSARY

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(Authorized Signature) *[Signature]* (Date) *[Signature]* 05/10/2004

James M. Slattery, #28,380

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06/15/2004 BABRAHA2 00000054 10091560

01 FC:1501	1330.00 OP
02 FC:1504	300.00 OP
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